(This final report is to be completed by the project director or site coordinator. Please type all responses.)

# Part 1: Identifying Information/Demographics

| Please Check One:                                                       |
|-------------------------------------------------------------------------|
| Arts Powered Learning                                                   |
| Creative Alternatives for Youth                                         |
| Grant Recipient                                                         |
| Grant award #                                                           |
| Period of ICA Grant: July 1, 2004 to June 30, 2005                      |
| Grant Recipient Federal EIN #                                           |
| Name of person completing report                                        |
| Phone # Email address                                                   |
| Date Report completed (/)                                               |
| Number of children and youth benefiting                                 |
| Number of other persons benefiting (audiences, community members)       |
| Number of artists participating, by category:                           |
| Professional artists                                                    |
| Semi-Professional artists                                               |
| Amateur artists                                                         |
| Number of participating students who are part of a special constituency |
| (minorities, people with disabilities, youth at risk)                   |
| Please describe:                                                        |

## **Part 2: Financial Information**

Instructions: This section should correspond to the proposed budget expenses as listed in the original application and reflect the actual expenses incurred. Please reference the original Project Budget when completing this section. Round all figures to the nearest dollar. Do not add in-kind contributions as 'Cash Expenses.' Please type all responses.

# **EXPENSES:**

| 1) OUTSIDE PROFESSIONAL SERVICE | <b>CASH EXPENSES</b> | IN-KIND MATCH |
|---------------------------------|----------------------|---------------|
| A) Artist(s) Fees               | \$                   | \$            |
| B) Additional Artist Fees       | \$                   | \$            |
| C) Consultant Fees              | \$                   | \$            |
| D) Teacher Substitute           | \$                   | \$            |
| E) Other:                       | \$                   | \$            |
| 2) TRAVEL/LODGING               | \$                   | \$            |
| A) Artist Travel                | \$                   | \$            |
| B) Artist Lodging               | \$                   | \$            |
| C) Other:                       | <b>4</b>             | <u> </u>      |
| 3) SPACE RENTAL                 |                      |               |
| A) Artist Studio Rental         | ¢                    | ¢             |
| B) Other                        | \$<br>\$             | \$<br>\$      |
| 4) REMAINING OPERATING EXPENSE  |                      |               |
| A) Supplies/Materials\$\$       | \$                   | \$            |
| B) Equipment lease/rental       | \$                   | \$            |
| C) Documentation                | \$                   | \$            |
| D) Publicity Costs              |                      | \$<br>\$      |
| E) Printing/Copying             | \$                   |               |
| F) Phone/Postage                | \$                   | \$            |
| G) Insurance                    | \$                   | \$            |
| H) Other:                       | \$<br>\$             | \$<br>\$      |
| 5) TOTAL EXPENSES               | •                    | •             |

# **EARNED REVENUE:**

|                                                                       | <b>CASH REVENUE</b> | CASH SUB-TOTAL       |
|-----------------------------------------------------------------------|---------------------|----------------------|
| 6) ADMISSIONS                                                         |                     |                      |
| A) Ticket Sales                                                       | \$                  | _ \$                 |
| 7) CONTRACTED SERVICES REVENUE                                        |                     |                      |
| •                                                                     |                     |                      |
| A) Tuition from workshops, classes, etc.                              | \$                  | _                    |
| B) Other:                                                             | \$                  | _                    |
| 8) EARNED REVENUE SUBTOTAL                                            |                     | \$                   |
| UNEARNED REVENUE:                                                     |                     |                      |
| 9) CORPORATE/BUSINESS SUPPORT                                         | •                   |                      |
| 10) PRIVATE FOUNDATION SUPPORT                                        | \$                  |                      |
| 11) OTHER PRIVATE SUPPORT                                             | \$                  | -                    |
| A) PTO/PTA                                                            | \$                  |                      |
| B) Other Organizations                                                |                     |                      |
| C) Fund-Raisers                                                       | \$                  |                      |
| 12) GOVERNMENT SUPPORT                                                | \$                  | -                    |
| A) Federal                                                            | •                   |                      |
| B) State/Regional                                                     | \$                  |                      |
| C) Local (City/County/District)                                       | \$                  |                      |
| , , , , , , , , , , , , , , , , , , , ,                               | \$                  | -                    |
| 13) UNEARNED REVENUE SUBTOTAL\$                                       |                     | \$                   |
| 14) APPLICANT CASH\$                                                  |                     | \$<br>\$             |
| 15) ICA GRANT\$                                                       |                     | \$<br>\$             |
| 16) TOTAL APPLICANT REVENUE                                           |                     | -                    |
|                                                                       |                     | \$                   |
| 17) TOTAL OF IN-KIND CONTRIBUTION                                     | \$                  | _                    |
|                                                                       | CERTIFICATION       |                      |
| I/We the undersigned certify that the forego                          |                     |                      |
| are true and correct and that all expenditure<br>Authorizing Official | ·                   | rpose of this grant. |
| Signature                                                             |                     |                      |
| Project Director                                                      |                     |                      |
| SignatureF                                                            |                     |                      |

#### Part 3: Narrative

Directions: Shape your narrative by developing a coherent description of your program, its design, implementation, and accomplishments. Please be specific and cite examples. Use the following questions to structure your narrative:

- 1. What did your program consist of? Where did it take place? Who would be served by the program? What did these persons need that the program could provide? How did your program's design logically reflect these needs?
- 2. What were your program's goals? What knowledge, attitudes, values, beliefs, or behaviors should students, youth, and other participants have learned or acquired as a result of the program?
- 3. How did you evaluate the program, in order to assess whether it achieved these goals?
- 4. What did the evaluation reveal? To what extent and in what ways were the program's goals met?

#### Part 4: Data

Directions: In this section, please describe actual data that you collected in your program and that you used to develop conclusions about your program's accomplishments. include or attach samples of this data.

- Evidence of learning. This might include student test scores (either standardized tests administered by Idaho or the school district) or teachermade tests; scores or scales from rubrics, checklists, and other instruments that you used to assess student work samples; or narrative descriptions of student learning obtained from direct observations or videotape documentation. The evidence of learning might include three types of artifacts:
  - o Samples of instruments (tests, rubrics, surveys, etc.)
  - o Sample responses or completed instruments
  - Summaries of scores
- Other evidence of program accomplishment. This might include results of parent surveys, narrative results of observations of program events, etc.

### **Part 5: Documentation**

Directions: In this section, please describe and attach samples of actual documentation that you collected in your program and that supports your conclusions about your program's accomplishments.

- **Describe each documentary piece** (e.g., artifact #1 is a video clip of students creating their own dance movement choreography; photographs 1-12 show the progression of a student's visual art work)
- Attach or enclose the samples, numbered and referenced to the descriptions.

# **Part 6: Interpretation**

Directions: In this section, interpret the results of your evaluation. This is your opportunity to expound on what you have learned.

- Explain background and context
- Highlight things that are unique or unusual
- Relate the significance

# **Part 7: Reporting to Other Audiences**

Directions: In this section, describe how you reported the results of your program to other audiences, "stakeholders," or interested persons in addition to the ICA. (Remember, these might be your own board, school board members, PTO/PTA, community groups, the press/media, or local and state policymakers.)

What was the audience to whom you reported? Purpose How did you present the information? How did you follow up with your audience?